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Bank Commissioner

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# State of New Hampshire

## Banking Department

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[www.nh.gov/banking](http://www.nh.gov/banking)

**MORTGAGE BANKER PRINCIPAL OFFICE LICENSE** ☐ \$500

**MORTGAGE BROKER PRINCIPAL OFFICE LICENSE** ☐ \$500

**NH BRANCH OFFICES, ENTER TOTAL @ \$500 EACH** \$

**Make Check Payable To: "STATE OF NEW HAMPSHIRE"**

### FOR OFFICE USE ONLY

Ck. # \_\_\_\_\_ Amt.\$ \_\_\_\_\_

Rec'd by \_\_\_\_\_ Date \_\_\_\_\_

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Entered By \_\_\_\_\_ Date \_\_\_\_\_

App. Complete Date \_\_\_\_\_

Approved By \_\_\_\_\_ Date \_\_\_\_\_

## **NH SPECIFIC MORTGAGE LENDER/BANKER OR MORTGAGE BROKER LICENSE APPLICATION INSTRUCTIONS**

Use the MU1 Form and the Part 2 of the NH Mortgage Application when newly applying for a license or when amending information on file with the department. When terminating or surrendering a NH mortgage license use the NH License Withdrawal Form available on our website at [www.nh.gov/banking/consumer.html](http://www.nh.gov/banking/consumer.html).

1. **New Application:** Answer all questions, complete all forms and pay appropriate fees. See detailed instructions below.
2. **Amendment Filing:** When using the MU1 Form and Part 2 of the NH Mortgage Application to amend filings, the required fields to complete are the "Date of Filing", the "Effective Date", check off "Amendment", and complete 1A and 1B on the MU1; then you only need to enter and circle the information on the forms that is being amended (that has changed from what is on file with the department). To amend information on Schedules A & B (principals of the company), use Schedule C which you may obtain from our website at [www.nh.gov/banking/consumer.html](http://www.nh.gov/banking/consumer.html).
3. **Surrender or Expiration:** New Hampshire has its own requirements when a company surrenders its license or allows it to expire without renewal at year end. Go to our website at [www.nh.gov/banking/consumer.html](http://www.nh.gov/banking/consumer.html) and get the NH License Surrender/Expiration Form and follow its directions.

### **New Application Instructions**

The principal office of the *applicant* must be licensed wherever it is located. Only those business locations of the *applicant/licensee* that are located in New Hampshire must be licensed as branches (use the MU3 Branch Office Form and pay the \$500 fee for each NH branch). The fee for a mortgage broker license is \$500 for the principal location. The license limits the *applicant/licensee* to brokering activities for first and second mortgage loans. The fee for a mortgage banker license is \$500 for the principal location. The mortgage banker license allows the *applicant/licensee* to conduct both lending and brokering activities for first and second mortgage loans. The fee for each NH branch office of the *applicant* is \$500. Each branch will be licensed for and may conduct the type of mortgage business that the *applicant* is licensed to conduct. The *applicant* must also provide a list of all persons who will act as mortgage loan originators, wherever they are located.

### **Special NH Instructions for Schedules A & B on the MU1 Form**

The MU1 Form that is the first part of New Hampshire's Mortgage License Application has two schedules attached where owners, officers and other *principals* of the applicant, including sole proprietors, are listed. Instructions to the MU1 tell the *applicant* to complete a MU2 Control Person Form for each individual checked off as a *Control Person* on the schedules. **All individuals listed on Schedules A & B are defined as "principals" (see definition of "principal" below) of the applicant and are therefore considered "control persons" in New Hampshire.** That means that for each individual listed on the schedules, the *applicant/licensee* must submit a MU2 Form, a Criminal History Record Information Authorization Form, a fingerprint card and records check fee. *Principals* include *direct owners* of 10% or more and *indirect owners* of 25% or more of the *applicant*.

Criminal Records checks are conducted by the State of New Hampshire Department of Safety, State Police Division on each individual listed on Schedules A & B. The Department of Safety charges a \$39 fee to cover costs for each record check. A copy of the *Department of Safety Division of State Police Criminal History Record Information Authorization Form* follows the MU2 Form. You may make copies of this form, and then complete a form for each individual listed on Schedule A & B of the MU1. Complete all items in Section I of the Authorization, and make sure to sign the release information in Section II of the form and have the form notarized. All checks and money orders for the record checks must be made payable to "State of NH – Criminal Records."

Fingerprints must be submitted in order to complete the criminal background checks. To request fingerprint card(s), which must be on a New Hampshire State Police fingerprint form, you may electronically submit a form or request a form from our website [www.nh.gov/banking/consumer.html](http://www.nh.gov/banking/consumer.html), call (603) 271-8675) or e-mail [licensing@banking.state.nh.us](mailto:licensing@banking.state.nh.us) the licensing section at the Banking Department, indicate the number of cards needed and the address where they should be sent (only one address; the *applicant/licensee* is responsible for distribution to applicable persons within their organization) and we will send fingerprint cards out to you right away.

Submit a *Criminal History Record Information Authorization Form*, fingerprint card and a fee in the amount of \$39 payable to “State of NH – Criminal Records”, for each individual listed on Schedules A & B of the MU1, to the NH Banking Department. We will forward the document(s) and check(s) to the Department of Safety. Fees covering multiple individuals may be combined into one check.

### Special NH Instructions for the Branch Office - MU3 Form

Each branch manager is a *principal* of the *applicant* or *licensee* under NH law. Accordingly, the *applicant/licensee* must submit a MU2 Form, a Criminal History Record Information Authorization Form, a fingerprint card and records check fee in the amount of \$39 (payable to “State of NH – Criminal Records”) for each NH branch manager when submitting a branch license application on the MU3 Form.

#### Definitions:

- A. “Applicant” means the mortgage lender or mortgage broker applying or amending information on this form. The only instance in which the *applicant* is an individual is in the case of a sole proprietorship.
- B. “Direct Owner” means any person, including individuals, that owns, beneficially owns, has the right to vote, or has the power to sell or direct the sale of 10% or more of the *applicant* or licensee.
- C. “Indirect Owner” means, with respect to direct owners and other indirect owners in a multilayered organization:
  - (a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of that corporation;
  - (b) in the case of an owner that is a partnership, all general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership’s capital;
  - (c) in the case of an owner that is a trust, the trust, each trustee and each beneficiary of 25% or more of the trust;
  - (d) in the case of an owner that is a Limited Liability Company (“LLC”), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC’s capital, and (ii) if managed by elected managers, all elected managers; and
  - (e) in the case of an indirect owner, the parent owners of 25% or more of their subsidiary.
- D. “Individual” means a human being.
- E. “Jurisdiction” means the federal government, a foreign government, a state, the District of Columbia, the Commonwealth of Puerto Rico, or any subdivision or regulatory body thereof.
- F. “Licensee” – means the mortgage lender or mortgage broker that holds a New Hampshire license and is amending information on this form.
- G. “Mortgage Lender” means mortgage banker under NH RSA 397-A for purposes of this application.
- H. “Person” means an individual, corporation, business trust, estate, trust, partnership, association, 2 or more persons having a joint or common interest, or any other legal or commercial entity however organized.
- I. “Principal” of the *applicant* or licensee means a direct owner with 10 percent or more ownership interest, corporate officer, director, member, general or limited liability partner, limited partner with 10 percent or more ownership interest, trustee, beneficiary of 10 percent or more of the trust that owns the *applicant* or licensee, executive officer, senior manager and any person occupying similar status or performing similar functions. New Hampshire branch managers are *principals* of the company, but are reported on Form MU3, the branch office form rather than on Schedule A of this MU1 Application Form.

Please make sure that all items on the MU1 and Part 2 of the NH Application Form are completed and all attachments, numbered to correspond to the question or item to which they respond, are enclosed with the application filing. Care in providing all the required information will result in the filing of a complete application and will enable us expeditiously to review the application without the need to write for further information.

# UNIFORM MORTGAGE LENDER/MORTGAGE BROKER FORM

## FORM MU1 INSTRUCTIONS

### A. GENERAL INSTRUCTIONS

1. **FILING** – Form MU1 is the Uniform Mortgage Lender/Mortgage Broker business Application. Any *applicant* for a Mortgage Lender or a Mortgage Broker business license may apply to *jurisdictions* that have adopted the Uniform Application using Form MU1. An *applicant* must also refer to each *jurisdiction* in which it is applying for *jurisdiction-specific* requirements.
2. **TERMS USED** – See the following Explanation of Terms section regarding italicized words/phrases.
3. **EXECUTION** – The execution section must be completed by an authorized representative of the *applicant* (corporate officer, partner, member, sole proprietor, etc).
4. **DATES** – The filing date is the date *applicant* submits this form to the *jurisdiction(s)*. The effective date is the date *applicant* would like this license/registration or amendment to become effective. Consult applicable *jurisdiction* for effective date expectations.
5. **AMENDMENTS** – The *applicant* must update information as required in each applicable *jurisdiction* by submitting amendments using Form MU1. Only complete the information that is being amended as well as the name of the *applicant* and circle the item being amended. Consult each *jurisdiction* concerning the return of the prior original license/registration document when submitting the amended Form MU1.
6. **CONTACT EMPLOYEE** – The individual listed as the contact employee must be authorized to receive all compliance and licensing information, communications, and mailings, and be responsible for disseminating it within the applicant's organization.
7. **SURRENDER / CLOSE** – When an *applicant* decides to cease operations under the license/registration, use the Form MU1 to notify *jurisdiction(s)* by checking the "surrender" box and completing only items 1A, J, and K. Surrender the original license/registration document (if any was issued) to the *jurisdiction(s)*. Consult each *jurisdiction* concerning additional specific requirements at surrender/closure.

### B. FILING INSTRUCTIONS

1. **FORMAT**
  - A. A fully completed Form MU1 is required to be submitted to each *jurisdiction* when the *applicant* is filing for the first time. The *applicant* should contact the appropriate *jurisdiction(s)* for specific filing requirements, including applicable fees.
  - B. The Execution section must include notarized original manual signature, for the initial Form MU1 filing.
  - C. Type all information.
  - D. Use only the current version of Form MU1 and its Schedules or a reproduction of them.
2. **ATTACHMENTS** – Provide the following:
  - A. Schedules A, B, and C – File Schedules A and B only with initial applications. Use Schedule C to update Schedules A and B as needed.
  - B. File a Form MU2 for each **individual** designated on Schedule A or C as a "control person".
  - C. Enclose a Certificate of Good Standing from the Secretary of State or similar state authority for the state where the *applicant* obtained its legal status listed in Item 3C and for the *jurisdiction(s)* for which the *applicant* is applying.
  - D. If the applicant is a partnership of any form, enclose a copy of the partnership agreement.
  - E. Some *jurisdiction(s)* require separate filings for use of fictitious name/trade name/doing business as name(s). Consult the *jurisdiction(s)* to determine such requirements, and attach a copy of such filing if required by that *jurisdiction*.
  - F. The name, full delivery address, and telephone number of the registered agent for service of legal process. Consult the *jurisdiction(s)* to determine if the registered agent is required to be located within the *jurisdiction(s)* in which you are applying.
  - G. Depending on the *jurisdiction*, individual(s) originating or soliciting to originate mortgage loans at the business may need to file a Form MU4. Please consult your chosen *jurisdiction(s)* to verify the requirements there.
  - H. Depending on the *jurisdiction*, branch offices may need to complete a Form MU3. Please consult your chosen *jurisdiction(s)* to verify the requirements there.
3. **FINANCIAL RESPONSIBILITY** – Consult each *jurisdiction* in which the *applicant* is applying to determine requirements for financial responsibility. These may include the submission of financial statements, surety bond(s), minimum net worth, or other requirements.
4. **JURISDICTION-SPECIFIC REQUIREMENTS** – Consult each *jurisdiction* in which the *applicant* is applying for a list of requirements unique to the *jurisdiction(s)*, including applicable fees, records retention, etc.

**C. EXPLANATION OF TERMS** – The following terms are italicized throughout Form MU1

**1. GENERAL**

**APPLICANT** – The mortgage lender or mortgage broker applying or amending information on this form. The only instance in which the *applicant* is an individual is in the case of a sole proprietorship.

**CONTROL** – The power, directly or indirectly, to direct the management or policies of a company, whether through ownership of securities, by contract, or otherwise. Any *person* that (i) is a director, general partner or officer exercising executive responsibility (or having similar status or functions); (ii) directly or indirectly has the right to vote 10% or more of a class of a voting security or has the power to sell or direct the sale of 10% or more of a class of voting securities; or (iii) in the case of a partnership, has the right to receive upon dissolution, or has contributed, 10% or more of the capital, is presumed to control that company.

**CONTROL PERSON** – An individual named in Item 1A or in Schedules A, B or C that directly or indirectly exercises *control* over the *applicant*.

**JURISDICTION** – A state, the District of Columbia, the Commonwealth of Puerto Rico, or any subdivision or regulatory body thereof.

**PERSON** – An individual, partnership, corporation, trust, or other organization.

**2. FOR THE PURPOSE OF ITEM 8**

**CHARGED** – Being accused of a crime in a formal complaint, information, or indictment (or equivalent formal charge).

**CONTROL AFFILIATE** – A *person* named in Item 1A or in Schedules A, B or C as a *control person* or any other individual or organization that directly or indirectly controls, is under common control with, or is controlled by, the *applicant*, including any current employee except one performing only clerical, administrative, support or similar functions, or who, regardless of title, performs no executive duties or has no senior policy making authority.

**ENJOINED** – Includes being subject to a mandatory injunction, prohibitory injunction, preliminary injunction, or a temporary restraining order.

**FELONY** – For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a *felony* is an offense punishable by a sentence of at least one year imprisonment and/or a fine of at least \$1,000. The term also includes a general court martial.

**FINANCIAL SERVICES OR FINANCIAL SERVICES RELATED** – Pertaining to securities, commodities, banking, insurance, consumer lending, or real estate (including, but not limited to, acting as or being associated with a bank or savings association, credit union, mortgage lender, mortgage broker, closing agent, title company, or escrow agent).

**FOREIGN FINANCIAL REGULATORY AUTHORITY** – Includes (1) a *financial services* authority of a foreign country; (2) other governmental body empowered by a foreign government to administer or enforce its laws relating to the regulation of *financial services* or *financial services-related* activities; and (3) a foreign membership organization, a function of which is to regulate the participation of its members in *financial services* activities listed above.

**FOUND** – Includes adverse final actions, including consent decrees in which the respondent has neither admitted nor denied the findings, but does not include agreements, deficiency letters, examination reports, memoranda of understanding, letters of caution, admonishments, and similar informal resolutions of matters.

**INVOLVED** – Doing an act or omission or aiding, abetting, counseling, commanding, inducing, conspiring with or failing reasonably to supervise another in doing an act or omission.

**MISDEMEANOR** – For *jurisdictions* that do not differentiate between a *felony* and a *misdemeanor*, a *misdemeanor* is an offense punishable by a sentence of less than one year imprisonment and/or a fine of less than \$1,000. The term also includes a special court martial.

**ORDER** – A written directive issued pursuant to statutory authority and procedures, including orders of denial, suspension, or revocation; does not include special stipulations, undertakings or agreements relating to payments, limitations on activity or other restrictions unless they are included in an *order*.

**PROCEEDING** – Includes a formal administrative or civil action initiated by a governmental agency, self-regulatory organization or a *foreign financial regulatory authority*; a *felony* criminal indictment or information (or equivalent formal charge); or a *misdemeanor* criminal information (or equivalent formal charge). The term does not include other civil litigation, investigations, or arrests or similar charges affected in the absence of a formal criminal indictment or information (or equivalent formal charge).

<b>FORM MU1</b>	<b>UNIFORM MORTGAGE LENDER/MORTGAGE BROKER FORM</b>		MORTGAGE BROKER <input type="checkbox"/>
			MORTGAGE LENDER <input type="checkbox"/>
			MORTGAGE SERVICER <input type="checkbox"/>
Date of Filing: _____		Effective Date: _____	

**WARNING:** Failure to keep this form current and to file accurate supplementary information on a timely basis, or the failure to keep accurate books and records or otherwise to comply with the provisions of law pertaining to the conduct of business for which you are applying, may violate the laws of the *jurisdictions* and may result in disciplinary, administrative, injunctive or criminal action.

**INTENTIONAL MISSTATEMENTS OR OMISSIONS OF FACTS MAY CONSTITUTE CRIMINAL VIOLATIONS.**

NEW APPLICATION ☐      SURRENDER ☐      AMENDMENT ☐      **To amend, circle item(s) being amended.**

1. Exact name, principal business address, mailing address, if different, and telephone numbers of *applicant*:

A. Full name of *applicant*:  
(if sole proprietor, provide last, first and middle name)

B. IRS Employer Identification Number  
(Social Security No is allowed for sole proprietorship)

C. (1) Name under which business primarily is or will be conducted, if different from Item 1A.

C. (2) List any other name(s) by which the *applicant* conducts or will conduct business and the *jurisdiction*(s) in which they are or will be used (Use additional sheets as necessary).

1. Name	Jurisdiction	2. Name	Jurisdiction
3. Name	Jurisdiction	4. Name	Jurisdiction

D. If this filing makes a name change on behalf of the *applicant*, enter the new name and specify whether the name change is of the  
☐ *applicant* name (1A) or ☐ business name (1C): \_\_\_\_\_

E. Main address: (Do not use a P.O. Box)

Number and Street

City

State/Country

Zip+4/Postal Code

F. Mailing address, if different:

PO Box or Number and Street

City

State/Country

Zip+4/Postal Code

G. Telephone Numbers and Website address:

Business phone

Fax line

Area Code

Telephone Number

Area Code

Telephone Number

website address #1

website address #2

H. Other than the office in 1E, does the *applicant* conduct business with consumers through branch offices or other business locations?  
☐ YES ☐ NO (In certain *jurisdictions*, branch offices or other business locations must be reported or approved. Use Form MU3.)

I. Contact Employee:

Name and Title

Area Code

Telephone Number

Number and Street

City

State/Country

Zip+4/Postal Code

E-mail Address

Fax Number

J. Employee authorized to respond to consumer complaints:

Name and Title

Area Code

Telephone Number

Number and Street

City

State/Country

Zip+4/Postal Code

E-mail Address

Fax Number

K. Physical address of location where the official books and records of the *applicant* will be kept. Consult each *jurisdiction* for specific records retention requirements.

Organization Name (if different from *applicant*) or Records Custodian Name

Area Code

Telephone Number

Number and Street

City

State/Country

Zip+4/Postal Code

**EXECUTION:** The undersigned, being first duly sworn, deposes and says that he/she has executed this form on behalf of, and with the authority of, said *applicant*. The undersigned and *applicant* represent that the information and statements contained herein, including exhibits attached hereto, and other information filed herewith, all of which are made a part hereof, are current, true and complete. The undersigned and *applicant* further represent that to the extent any information previously submitted is not amended such information is currently accurate and complete.

Date (MM/DD/YYYY)

Signature of authorized party

Title

Subscribed & Sworn before me

by

Notary seal here

Print Notary Public name

Print authorized party name

on this

day of

at

Month

Year

State

County

Notary Public Signature

Notary Appointment Expires (MM/DD/YYYY)

**This execution must always be completed in full with original, manual signature and notarization. Affix notary stamp or seal where applicable.**

Applicant full legal name: \_\_\_\_\_

2. Enter appropriate number in the box(es) for each *jurisdiction*:  
Enter "1" if *applicant is newly applying* in that *jurisdiction* as a mortgage lender (ML) and/or mortgage broker (MB).  
Enter "2" if *applicant has a pending application* in that *jurisdiction* as a mortgage lender (ML) and/or mortgage broker (MB).  
Enter "3" if *applicant is already licensed/registered* in that *jurisdiction* as a mortgage lender (ML) and/or mortgage broker (MB).

	ML	MB		ML	MB		ML	MB		ML	MB
Alabama			Idaho			Montana			Rhode Island		
Alaska			Illinois			Nebraska			South Carolina		
Arizona			Indiana			Nevada			South Dakota		
Arkansas			Iowa			New Hampshire			Tennessee		
California – DOC			Kansas			New Jersey			Texas – OCC		
California – DRE			Kentucky			New Mexico			Texas – SML		
Colorado			Louisiana			New York			Utah		
Connecticut			Maine			North Carolina			Vermont		
Delaware			Maryland			North Dakota			Virginia		
District of Columbia			Massachusetts			Ohio			Washington		
Florida			Michigan			Oklahoma			West Virginia		
Georgia			Minnesota			Oregon			Wisconsin		
Guam			Mississippi			Pennsylvania			Wyoming		
Hawaii			Missouri			Puerto Rico					

3. A. Indicate legal status of *applicant*.  
☐ Corporation ☐ Sole Proprietorship ☐ Other (*specify*) \_\_\_\_\_  
☐ Partnership ☐ Limited Liability Company
- B. *Applicant's* fiscal year end (MM/DD): \_\_\_\_\_
- C. If other than a sole proprietorship, indicate date and place *applicant* obtained its legal status (i.e., state or country where incorporated, where partnership agreement was filed, or where *applicant* entity was formed):  
State/Country of formation: \_\_\_\_\_ Date of formation (MM/DD/YYYY): \_\_\_\_\_
- D. If *applicant* is a publicly traded corporation, please insert stock symbol: \_\_\_\_\_

4. A. Directly or indirectly, does *applicant control*, is *applicant controlled by*, or is *applicant* under common control with, any person that is engaged in the business of a mortgage lender or mortgage broker? *If no, go to 4B.* YES ☐ NO ☐  
(check only one for each relationship, attach additional copies as needed)

This Partnership, Corporation, or Organization \_\_\_\_\_  
Partnership, Corporation, or Organization Name  
☐ controls *applicant* ☐ is controlled by *applicant* ☐ is under common control with *applicant*

\_\_\_\_\_  
Number and Street City State/Country Zip+4/Postal Code  
Briefly describe the *control* relationship, including an organizational chart which shows the relationship. Use additional sheets for comments if necessary.

- B. Directly or indirectly, is *applicant controlled by* any of the following? *If no, go to 5.* YES ☐ NO ☐  
☐ Bank Holding Company ☐ National Bank ☐ State Member Bank of the Federal Reserve System  
☐ State Non-Member Bank ☐ Savings Association/Savings Bank ☐ Credit Union ☐ Foreign Bank ☐ Thrift Holding Company

\_\_\_\_\_  
Financial Institution Name  
\_\_\_\_\_  
Number and Street City State/Country Zip+4/Postal Code  
Briefly describe the *control* relationship, including an organizational chart which shows the relationship. Use additional sheets for comments if necessary.

Schedule A and, if applicable, Schedule B must be completed as part of all initial applications.  
Amendments to schedules A and B must be provided on Schedule C as changes occur.

Applicant full legal name: \_\_\_\_\_

<p>5. Check type(s) of mortgage related business engaged in (or to be engaged in, if not yet active) by <i>applicant</i>.</p> <p>A. First mortgage loans</p> <p>B. Second mortgage loans</p> <p>C. Home equity loans, including lines of credit</p> <p>D. Loans guaranteed by the Federal Housing Administration (FHA)</p> <p>E. Loans guaranteed by the Veterans Administration (VA)</p> <p>F. Reverse mortgage loans</p> <p>G. High cost home loans (refer to various state definitions of covered transactions)</p> <p>H. Mortgage Servicing</p> <p>I. Other mortgage products and services (If "yes", briefly describe below)</p> <p>J. Credit insurance</p>	<p><b>YES</b></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	
<p>6. Will <i>applicant</i> engage in any non-mortgage-related business?</p> <p>If "yes" briefly describe. _____</p>	<p><b>YES</b></p> <p><input type="checkbox"/></p>	<p><b>NO</b></p> <p><input type="checkbox"/></p>
<p>7. Will <i>applicant</i> occupy or share space with any <i>person(s)</i> engaged in <i>financial services-related</i> activity? If "yes," provide the name(s) of the other <i>person(s)</i>. _____</p>	<p><b>YES</b></p> <p><input type="checkbox"/></p>	<p><b>NO</b></p> <p><input type="checkbox"/></p>
<p>8. If the answer to any of the following is "YES", provide complete details of all events or <i>proceedings</i> in an attachment. Refer to the explanation of terms section of the instructions for explanations of italicized terms. <b>Remember to file updates of these disclosures as needed.</b></p>		
<p style="text-align: center;"><b>Criminal Disclosure</b></p> <p>A. Has the <i>applicant</i> or a <i>control affiliate</i> ever:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to any <i>felony</i>?</p> <p>(2) been <i>charged</i> with any <i>felony</i>?</p> <p>B. In the past ten years has the <i>applicant</i> or a <i>control affiliate</i>:</p> <p>(1) been convicted of or pled guilty or nolo contendere ("no contest") in a domestic, foreign, or military court to a <i>misdemeanor involving: financial services or a financial services-related business or any fraud, false statements or omissions, theft or any wrongful taking of property, bribery, perjury, forgery, counterfeiting, extortion, or a conspiracy to commit any of these offenses?</i></p> <p>(2) been <i>charged</i> with a <i>misdemeanor</i> specified in 8B(1)?</p>	<p><b>YES</b></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p><b>NO</b></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>
<p style="text-align: center;"><b>Regulatory Action Disclosure</b></p> <p>C. Has any State or federal regulatory agency or <i>foreign financial regulatory authority</i> ever:</p> <p>(1) <i>found</i> the <i>applicant</i> or a <i>control affiliate</i> to have made a false statement or omission or been dishonest, unfair or unethical?</p> <p>(2) <i>found</i> the <i>applicant</i> or a <i>control affiliate</i> to have been <i>involved</i> in a violation of a <i>financial services-related</i> regulation(s) or statute(s)?</p> <p>(3) <i>found</i> the <i>applicant</i> or a <i>control affiliate</i> to have been a cause of a <i>financial services-related</i> business having its authorization to do business denied, suspended, revoked or restricted?</p> <p>(4) entered an <i>order</i> against the <i>applicant</i> or a <i>control affiliate</i> in connection with a <i>financial services-related</i> activity?</p> <p>(5) denied, suspended, or revoked the <i>applicant's</i> or a <i>control affiliate's</i> registration or license or otherwise, by <i>order</i>, prevented it from associating with a <i>financial services-related</i> business or restricted its activities?</p> <p>D. Has the <i>applicant's</i> or a <i>control affiliate's</i> authorization to act as an attorney, accountant, or State or federal contractor ever been revoked or suspended?</p> <p>E. Is the <i>applicant</i> or a <i>control affiliate</i> now the subject of any regulatory <i>proceeding</i> that could result in a "yes" answer to any part of 8C?</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>
<p style="text-align: center;"><b>Civil Judicial Disclosure</b></p> <p>F. (1) Has any domestic or foreign court:</p> <p>(a) in the past ten years <i>enjoined</i> the <i>applicant</i> or a <i>control affiliate</i> in connection with any <i>financial services-related</i> activity?</p> <p>(b) ever <i>found</i> the <i>applicant</i> or a <i>control affiliate</i> was <i>involved</i> in a violation of any <i>financial services-related</i> statute(s) or regulation(s)?</p> <p>(c) ever dismissed, pursuant to a settlement agreement, a <i>financial services-related</i> civil action brought against the <i>applicant</i> or <i>control affiliate</i> by a State or <i>foreign financial regulatory authority</i>?</p> <p>(2) Is the <i>applicant</i> or a <i>control affiliate</i> named in any pending <i>financial services-related</i> civil action that could result in a "yes" answer to any part of 8F(1)?</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>
<p style="text-align: center;"><b>Financial Disclosure</b></p> <p>G. In the past ten years has the <i>applicant</i> or a <i>control affiliate</i> been a mortgage lender or a mortgage broker or a <i>control affiliate</i> of a mortgage lender or a mortgage broker that has been the subject of a bankruptcy petition?</p> <p>H. Has a bonding company ever denied, paid out on, or revoked a bond for the <i>applicant</i>?</p> <p>I. Does the <i>applicant</i> have any unsatisfied judgments or liens against it?</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>

Applicant full legal name: \_\_\_\_\_

Date: \_\_\_\_\_

- |    |   |                              |                             |
|----|---|------------------------------|-----------------------------|
| 3. | Are there any indirect owners of the <i>applicant</i> required to be reported on Schedule B?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. | Complete the "Title or Status" column by entering board/management titles; status as a partner, trustee, sole proprietor, or shareholder; and for shareholders, the class of securities owned (if more than one is issued).   |                              |                             |
| 5. | <p>(a) In the "<i>Control Person</i>" column, enter "Yes" if the <i>person</i> has "<i>control</i>" as defined in the instructions to this form, and "No" if the <i>person</i> does not have <i>control</i>. Note that under this definition, most executive officers and all 10% owners, general partners, and trustees would be "<i>control persons</i>". For each "Yes" response, submit Control Persons Information on form MU2.</p> <p>(b) In the "Publicly Traded" column, if the owner is a publicly traded company, enter the stock symbol; otherwise enter "NA".</p> |                              |                             |

[illegible]



<div>Schedule B</div> <div>INDIRECT OWNERS</div> <div>(Answer for Form MU1 Item 4)</div>	Applicant full legal name: _____				
	Date: _____				
1. Use Schedule B only in new applications to provide information on the <b>indirect</b> owners of the <i>applicant</i> . Use Schedule A in new applications to provide information on <b>direct</b> owners. File all amendments on Schedule C. <b>Complete each column.</b>					
2. With respect to each owner listed on Schedule A, (except individual owners), list below: <div><div>(a) in the case of an owner that is a corporation, each of its shareholders that beneficially owns, has the right to vote, or has the power to sell or direct the sale of, 25% or more of a class of a voting security of that corporation; For purposes of this Schedule, a <i>person</i> beneficially owns any securities (i) owned by his/her child, stepchild, grandchild, parent, stepparent, grandparent, spouse, sibling, mother-in-law, father-in-law, son-in-law, daughter-in-law, brother-in-law, or sister-in-law, sharing the same residence; or (ii) that he/she has the right to acquire, within 60 days, through the exercise of any option, warrant or right to purchase the security.</div><div>(b) in the case of an owner that is a partnership, <b>all</b> general partners and those limited and special partners that have the right to receive upon dissolution, or have contributed, 25% or more of the partnership's capital;</div><div>(d) in the case of an owner that is a trust, the trust and each trustee; and</div><div>(e) in the case of an owner that is a Limited Liability Company ("LLC"), (i) those members that have the right to receive upon dissolution, or have contributed, 25% or more of the LLC's capital, and (ii) if managed by elected managers, all elected managers.</div></div>					
3. Continue up the chain of ownership listing all 25% or more owners at each level. Once a public reporting company is reached, no ownership information further up the chain of ownership need be given.					
4. Complete the "Status" column by entering status as a partner, trustee, shareholder, etc. and if shareholder, class of securities owned (if more than one is issued).					
5. In the "Publicly Traded" column, if the owner is a publicly traded company, enter the stock symbol; otherwise enter "NA".					
FULL LEGAL NAME (Individuals: Last Name, First Name, Middle Name)	Entity in Which Interest is Owned	Status	% Ownership	Publicly Traded	S.S. No., IRS Tax No. or Employer ID

<p><b>Schedule C</b>  <b>AMENDMENTS TO</b>  <b>SCHEDULES A &amp; B</b>          (Amendments to answers for          Form MU1 Item 4)</p>	<p><i>Applicant</i> full legal name: _____</p> <p>Effective Date: _____</p>	
--	---	--

Effective Date: \_\_\_\_\_

2. In the Type of Amendment ("Type of Amd.") column, indicate "A" (addition), "D" (deletion), or "C" (change in information about the same *person*).

[illegible]

- [illegible]



# State of New Hampshire

## Banking Department

64B Old Suncook Rd  
Concord, NH 03301

Peter C. Hildreth  
Bank Commissioner

Robert A. Fleury  
Deputy Bank Commissioner

Telephone: (603) 271-3561

Fax: (603) 271-0750

Licensing: (603) 271-8675

[www.nh.gov/banking](http://www.nh.gov/banking)

## Part 2 of the NH Mortgage Lender/Banker or Mortgage Broker Application Form (Continued from Question No. 8 of the MU1)

### OTHER COMPANY CONTACTS

9. A. Principal Licensing Contact Person (This is the individual who may sign this application form and to whom all licensing questions and issues will be addressed. The named individual must be authorized by the company to make sworn statements and attestations on behalf of the company where required as part of the application and/or renewal process. The Principal Contact Licensing Person may be the same as the person named in Item 1 Section I of the MU1):

Name and Title	Area Code	Telephone Number
Number and Street	City	State/Country
E-mail Address	Zip+4/Postal Code	Fax Number

B. Employee to contact regarding legal/litigation matters:

Name and Title	Area Code	Telephone Number
Number and Street	City	State/Country
E-mail Address	Zip+4/Postal Code	Fax Number

C. Employee to contact regarding examination matters:

Name and Title	Area Code	Telephone Number
Number and Street	City	State/Country
E-mail Address	Zip+4/Postal Code	Fax Number

### BRANCH OFFICES

10. All locations in the State of New Hampshire where NH loans are originated, made, brokered, processed, underwritten and/or serviced must be licensed as branches; **enclose a Branch Application Form MU3 and \$500 for each New Hampshire branch location;** attach an Individual Disclosure Form MU2, a Criminal History Record Information Authorization Form, fingerprint card and \$39 fee for each branch manager. Submit copies of any written agreements or contracts between the *applicant/licensee* and any NH branch office.

### BONDING

11. Mortgage brokers and mortgage lenders (bankers) must include an original \$20,000 continuous surety bond. A mortgage lender (banker) must increase the amount of their surety bond from \$20,000 to \$100,000 if their net worth is or will fall below \$100,000 at any time during the license period. We cannot accept copies of the bond; we must have the originally executed bond. The bond must be signed by three people: 1) an authorized officer of the company that is the *applicant* or licensee, 2) an individual with a power of attorney (attach a copy of the POA) who may sign on behalf of the surety company, and 3) (the counter-signature) an insurance agent of the surety company who is duly licensed by the New Hampshire Insurance Department (does not have to be a resident agent; any NH licensed agent of the company may sign). All three signature lines must be originally signed.
- If *applicant* is a "mortgage broker", attach original \$20,000 surety bond (use attached form; we cannot accept photocopies).
  - If *applicant* is a "mortgage banker", attach a \$100,000 surety bond if the *applicant's* net worth is now or will ever fall below \$100,000 during its period of licensure in NH.
  - Provide name and telephone number of insurance agent to contact regarding the bond:

(Name)

(Telephone)

(d) Copies of the bond forms are attached to this application form and are also found on our website at [www.nh.gov/banking/consumer.html](http://www.nh.gov/banking/consumer.html).

**FORM U-2, UNIFORM CONSENT TO SERVICE OF PROCESS**

12. Submit Form U-2 (see form and instructions that are attached to this application form).

**ORGANIZATION AND QUALIFICATION PAPERS**

13. (a) *Applicants* organized under the laws of the State of NH must submit a copy of the Certificate of Formation issued by the NH Secretary of State.  
(b) Foreign (not formed under NH law) corporations, foreign limited liability companies and foreign partnerships must provide a copy of their home state registration and proof of registration as a foreign corporation, foreign limited liability company or foreign partnership issued by the NH Secretary of State (Certificate of Authority; Telephone Number: 603-271-3244 or 603-271-3246; [www.nh.gov/sos/corporate](http://www.nh.gov/sos/corporate) ).  
(c) *Applicants* must provide organizational documents as follows: corporations must submit a copy of their Articles of Incorporation and By-Laws and any amendments thereto; Partnerships must submit a copy of the Partnership or Limited Partnership Agreement and any amendments thereto; and Limited Liability Companies must submit copies of their Articles of Organization, any Management Agreements that exist, and any amendments to either.  
(d) Foreign and domestic *applicants* who propose to use a trade name in NH must provide proof of trade name registration issued by the NH Secretary of State. (Telephone Number: 603-271-3244 or 603-271-3246) The "Owner" of the trade name listed on the registration must match the name of the "*Applicant*". If these are not the same, ownership must be changed through the Secretary of State's office.

**N.H. AGENT**

14. Foreign (not formed under NH law) entities must appoint and maintain at all times a registered agent in New Hampshire. If the *applicant* has a NH branch office, an individual in that office may be appointed as the NH registered agent. If the *applicant does not have* a NH branch office or does not wish to appoint someone in a branch office, the *applicant* must appoint another person to be the NH registered agent. The agent's office must be open during regular business hours. Banking Department examinations of the licensee's books and records may take place at the registered agent's office.

Name of Agent: \_\_\_\_\_ Telephone: \_\_\_\_\_

Complete address of NH Agent (the actual physical location, street, town or city and zip): \_\_\_\_\_

(Provide a New Hampshire business address)

Mailing Address of Agent: \_\_\_\_\_

**EXPERIENCE AND PAST CONDUCT**

15. Provide the name of the individual located at the *applicant's* principal office who meets the experience requirements of NH RSA 397-A:5, III(e). This individual shall have been actively engaged in the mortgage business in a similar supervisory capacity for a minimum of three (3) of the preceding five (5) years. Attach a current resume to document this individual's qualifications.

Name

Title

**FINANCIAL CONDITION**

16. All *applicants* must submit financial statements. Financial statements must be consistent with the legal status of the *applicant*. Corporations must provide the corporation's financial statements. Mortgage bankers must demonstrate a minimum net worth of \$100,000 OR they must submit a \$100,000 surety bond to qualify for a license. A banker not submitting a surety bond must at all times maintain a net worth of at least \$100,000. Both brokers and bankers shall demonstrate and maintain a positive net worth. Attach the following:
- A. Copies of the following that are prepared in accordance with generally accepted accounting principles by a public accountant, certified public accountant (audited statements are required if an audit was performed), or the *applicant's* financial officer who must include an attestation, signed under penalty of Unsworn Falsification pursuant to NH RSA 641:3, that the financial statements are true and accurate to the best of his or her belief and knowledge:
1. Balance sheet as of the last fiscal year end and as of the most recent quarter end.
  2. Cash flow statement as of the last fiscal year end and as of the most recent quarter end.
  3. Income statement as of the last fiscal year end and as of the most recent quarter end.
  4. Note disclosures for the above.
- B. Individuals, sole proprietors, partnerships, limited liability companies and corporations with 20 or fewer shareholders must also attach the *applicant's* most recent federal tax returns.
- C. Publicly traded corporations, and wholly owned subsidiaries of publicly traded corporations, may submit copies of their most recent SEC 10K and 10Q forms in lieu of financial statements required by 16A if the financial statements reflect the operations and financial position of the *applicant* itself.
- D. If the financial statement is more than 6 months old, provide an interim balance sheet and income statement as of the *applicant's* last quarter end.
- E. *Applicants* must submit a copy of the most recent federal business income tax return (1040, 1120, 1120-S, and K-1s).

## OPERATIONS

17. How are loans funded? Check all that apply.

Correspondent Lender ☐ , Table Funded ☐ , Own Funds ☐ , Warehouse Line of Credit ☐ ,  
Other ☐ Describe:

- (a) Brokers – list of **all correspondent lenders** that make NH loans for your company.  
(b) Bankers – list of **all correspondent brokers** that broker NH loans for your company.

Include company name, address, telephone # and contact person for each; attach a separate sheet if necessary.

Company Name

Address/Zip

Telephone No.

Contact Person

## RATE LOCK COMMITMENTS

18. Are you applying for a mortgage lender (banker) license and will you issue rate lock commitments? \_\_\_\_\_ Yes \_\_\_\_\_ No. If “yes,” respond to Item 19. If “no,” skip Item 19. (You do not need to complete Item 19 unless you are applying for licensure as a mortgage banker AND you are requesting authorization to issue rate lock commitments; mortgage brokers cannot issue rate lock commitments in their own names).
19. Attach copies of Federal National Mortgage Association (“FNMA”), Federal Home Loan Mortgage Corporation (“FHLMC”) and/or Government National Mortgage Association (“GNMA”) approvals, and an audited financial statement demonstrating \$500,000 net worth in cash and marketable securities.

## OR

If the *applicant* is a wholly-owned subsidiary of a publicly traded company, attach the most recent common stock rating available at the time of application demonstrating that the parent corporation’s common stock is rated among the four highest categories by Standard and Poor’s Corporation, Fitch Investors Service or Valueline Investment Survey; **AND** a written commitment from the parent corporation guaranteeing that the parent corporation will protect borrowers from losses resulting from the *applicant*/subsidiary mortgage banker’s failure to honor its rate-lock commitments is attached to this application.

**MORTGAGE ORIGINATORS (NEW APPLICATION FORM)**

20. Fill out the schedule below to provide a list of all individuals, wherever located, who will originate, make or broker New Hampshire mortgage loans for your company. Include both originators located in NH and originators located outside of NH. You do not need to include your company's originators who do not and will not originate NH loans. Enter the beginning date that each listed originator became associated with the *applicant* company. Please copy this page and attach it to the application if you have more than 36 individuals who will originate NH loans. If this is a newly formed company, you may omit this information from the application and submit a list of NH originators with the company's first NH Annual Report (due February 1<sup>st</sup> each year).

	First Name	Middle Initial	Last Name	Suffix, if any	Last 4 digits of Social Security Number	Start Date (MM/DD/YY)
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**WARNING:** Failure to keep this entire application/amendment licensing form current and to file accurate supplementary information on a timely basis, or otherwise to comply with the provisions of law pertaining to the conduct of business in New Hampshire violates the laws of New Hampshire and may result in disciplinary, administrative, injunctive or criminal action.

**INTENTIONAL MISSTATEMENTS OR OMISSIONS OF FACTS MAY CONSTITUTE CRIMINAL VIOLATIONS.**

**THE PERSON NAMED IN ITEM NO. 1,I OF FORM MU1 AS THE CONTACT EMPLOYEE, OR AS THE PRINCIPAL LICENSING CONTACT NAMED IN ITEM NO. 9,A OF PART 2 OF THE NH APPLICATION FORM, MUST MAKE THE AFFIRMATION BELOW AND SIGN THE APPLICATION UNDER PENALTY OF UNSWORN FALSIFICATION, RSA 641:3.**

### **AFFIRMATION**

I subscribe and affirm, under penalty of perjury, that the statements made in this application, including the MU1 and Part 2 of the NH Application Form and statements made in any accompanying papers, schedules and attachments, have been examined by me and to the best of my knowledge and belief are true, correct and complete, and that I am duly authorized to execute this affirmation. I understand that any misrepresentation made to the banking department may result in denial or revocation of the mortgage license to which this form relates.

I agree, on behalf of the *Applicant*, that pursuant to NH RSA 397-A:10,IV, the *Applicant* will promptly report and amend documents and records on file with the New Hampshire Banking Department for any material changes (including but not limited to change in owners, officers, directors, managers including NH branch managers, address, form of organization, contact information, FYE, etc.). The report of an amendment must be filed within 30 days of the event that requires the filing of an amendment.

I acknowledge on behalf of the *Applicant* that the *Applicant's* business, if licensed, will be operated in accordance with the New Hampshire Revised Statutes Annotated and rules of the New Hampshire Banking Department, and further acknowledge that the New Hampshire Banking Department is authorized to conduct examinations of the business affairs and records of the *Applicant's* licensed business at any time with or without notice, and that all books, papers, files, related material, and records of assets, whether electronically stored or otherwise, shall be subject to the Department's examination. I am signing this document under penalty of Unsworn Falsification pursuant to NH RSA 641:3.

Date: \_\_\_\_\_

For \_\_\_\_\_  
(Print or type *Applicant* or Licensee's name)

By \_\_\_\_\_  
(Print or type name of the authorized signatory)

Signature \_\_\_\_\_  
(Signed under penalty of Unsworn Falsification  
pursuant to NH RSA 641:3)

Title \_\_\_\_\_